

THE SPANISH INFLUENZA PANDEMIC IN TASMANIA, 1919

'A STUDY OF THE IMPACT AND EFFECT OF INFLUENZA
IN TASMANIA, 1919'

by

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This thesis contains no material which has been accepted for the award of any other degree or diploma in any university, and to the best of the candidates knowledge and belief, the thesis contains no copy or paraphrase of material previously published or written by another person, except when due reference is made in the text of the thesis.

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INTRODUCTION

The original inspiration for this dissertation came from Professor Michael Roe and an article by Humphrey McQueen entitled, 'The Spanish Influenza Pandemic in Australia, 1918 - 1919'.¹ To a certain extent this work is an extension of McQueen's study. My personal pre-occupation with the impact and effects of the influenza epidemic in Tasmania has both a positive and negative side. Firstly, negative, because the reader can only assume that the situation in Tasmania correlated generally with the effects in the rest of the world - this being not the case at all. Secondly, positive, because the author has used Tasmania as a type of laboratory in which the viability of McQueen's conclusions may be tested. For the sake of academic neatness the introduction has been broken into two distinct parts. There are two reasons. One, such materials as the origins of the epidemic, its characteristics, as soon, were inadequate to require a separate chapter; two, it is a necessity that offers background knowledge to the reader and effectively introduces the chapters following. Hence its juxta-position within the latter part of the introduction and the first chapter.

The universality of influenza has made it a topic of discussion in all corners of the globe. The pandemic of 1918 - 1919 added much to the impetus of this debate and encouraged the writing of numerous books and articles in almost every language. This immediately limited my access to the wealth of materials available, though English editions proved quite adequate within the scope of work undertaken. MacFarlane Burnet and Ellen Clark's research into

the cause and effects of influenza is one such work.² An extensive analysis of the global effects of the pandemic by Richard Collier tackles the issue from a personalized viewpoint.³ However, the information provided is interesting and elaborate. A pioneering study by J.H.L. Cumpston, Federal Director of Quarantine in 1919, later historian, placed influenza in a political perspective.⁴ Cumpston recognized the need for a national system of quarantining so that a future epidemic may be fought in a more unified and systematic manner.⁵ He further emphasized that placing control of quarantine matters in the 'hands of committees with very little experience in the control of epidemics'⁶ was inadequate. Subsequent events proved him correct. The author accepts the validity of this comment. The situation in Tasmania differed little to that on the mainland and can only reinforce Cumpston's view.

Burnet and Clark urged the study of influenza because 'of the possible imminence of another great pandemic arising'⁷ This appears to be the criteria of many medical historians who are working even now to find an effective answer to the control of influenza. On the International scene the main function of the W.H.O. Influenza Surveillance Centre is to maintain a constant vigilance over the entire world.⁸ They must detect and erase influenza unless the nightmarish ghost of 1918 - 1919 may arise once more from the ashes.

Locally, there has been little done on influenza in Tasmania. An unpublished article by Humphrey McQueen entitled, 'The Spanish Influenza Pandemic in Australia, 1918 - 1919' made

small references to the impact of the disease in Tasmania. However, it was invaluable as a hypothetical base which could test the validity of my own work. For example, the author can only reinforce McQueen's main tenet that:

'if national unity involved loyalty to the Commonwealth as an administrative machine, the pandemic showed how little of it there was.'

Tasmania's defiant stand against the federal authorities over shipping in April of 1919 is the one major illustration. Further, the author cannot deny the validity of McQueen's second conclusion, which in turn was derived from Lloyd Robson's The First A.I.F. McQueen does not reject Robson's 'theme' that the First World War wrecked 'Australian optimism and happiness' but prefers to stress his second notion that it created a 'situation where negative thought and destructive criticism could flourish.' ¹¹ This proposal is accepted but not in the sense of long term implications. Certainly society was divided in its response to influenza and this may have been a continuity of the situation created by the war. However, 'destructive criticism' eventually found positive outlets, especially in the field of social reform. McQueen's analysis falls short in this respect. His failure to take up the issues that were in consequence of the epidemic leaves a sense of the work's abruptness and hints that his conclusions may have been prematurely conceived. Thus his work emphasizes the negative side of the issue. The author shall go one stage further than McQueen by analysing, in reference to Tasmania, the positive acquisitions reaped from the epidemic. Tasmania was not overwhelmed by the disease but instead took an object lesson from it and diverted that knowledge towards reforms that would safeguard future generations from the anguish of another outbreak.

The most extensive study of the period 1914 - 1916 is Marilyn Lake's thesis and book on the effects of the First World War on Tasmanian society.¹² To the author, Lake fails to give an adequate account, either politically or socially of 1919. Peter Fagan sees the major reason for this type of mistake in Lake's pre-occupation with one issue.

'In Lake's work, the war plays the role of a central dynamic, and events are only considered that are in some way related to the war.'¹³

Its main inadequacy is lack of information on the prevailing influenza epidemic. To Lake, it merely warranted one sentence.¹⁴ What surprises the author is that if Lake intended to write a thesis on the impact of war on society and politics, would not influenza come into her calculations? Some may disagree. However, many historians have linked the pandemic of 1918 - 1919 as an offspring of the First World War.¹⁵ In my mind the two are inseparable. To Lake, the war created 'a fragmentation of the community.'¹⁶ So too did influenza, though the effect was temporary. The two are thus complemented. Also, Lake's assessment of the elections in May of 1919 missed one fundamental issue - influenza. The epidemic was used consistently by the Labour party as a weapon with which to simultaneously beat the government and win votes over. This proved a constant theme throughout most of 1919 and reached a peak in August when the disease finally became settled in Tasmania.

Lake's hasty assessment of 1919 also has other implications which led her to omit further important issues of the period. For example, the government's response to the epidemic, the ascendancy of philanthropy, the dislocation of the economy. Finally, and

perhaps the most important of all - the social issues and the eventual benefits reaped from the outbreak.

It is hoped that this work will fill in these gaps. My object is to correct the imbalance created by Lake's work in answering the questions posed.

The fact that this work is not only medical but social, economical and political, caused me to range through a wide and varied number of sources as time permitted. Newspapers and official records were used. The former being especially valuable for their reports of Parliamentary debates due to the lack of a Tasmanian Parliamentary Hansard. The Medical Journal of Australia greatly alleviated the author's naivety as to the medical side of the question. Articles in the History of the World War (two types of issue) added to and extended my knowledge of the pandemic. My search through diaries in the Tasmanian archives proved fruitless, however, the discovery of A.P. Crisp's Reminiscences illuminated on the anguish felt by returning soldiers who were further detained in quarantine. Interviews with Sir William Crowther, John Reynolds and the once matron of Zeehan Hospital, Cicely O'Brien added a personal touch to my knowledge of the period and reinforced notions gathered from other sources.

No-one knows precisely where the great pandemic of 1918 - 1919 began. It was thought by the French and other countries that the malady originated in Spain, hence the popular term 'spanish flu'.

However, a more likely suggestion was that the 'grippe', as it was sometimes called, manifested itself in the rat-infected trenches of northern France where corpses rotted at the whim of the elemental forces. It has also been asserted that the origin of the pandemic was an overcrowded army camp in Kansas where a number of soldiers were struck down by the disease. From there, infected troops could have taken the virus in Asia and Europe.¹⁷

In Tasmania, a contemporary in the Daily Telegraph observed that:

'the physicians and scientists of the Allied countries have seriously considered whether the germs of the disease were intentionally disseminated by the Kaiser's government with the intention (of) weakening (its) opponents.'

He added:

'....the suggestion cannot be hastily dismissed.'¹⁸

Whatever its ultimate source, the fact remains that by the spring of 1919 when the epidemic had exhausted itself some twenty million people had died,¹⁹ including eleven thousand Australians.²⁰ As such, the outbreak of influenza, being as it were an appendage to the cessation of conflict further demoralisation on a global scale and added impetus to the deterioration of public health, already at an all time low.

'Spanish' influenza struck unexpectedly and always with a racy effectiveness. The victim first experienced chills or chilly sensations, followed by fever, prostration, pain throughout the body, headaches and cough. The temperature rose rapidly from

100° - 101° in mild cases to that of 103° - 104° in those more extreme. Shortness of breathe, spitting of blood, and dusky coloured skin from lack of air were usual characteristics. If these symptoms were not successfully dealt with they frequently became pneumonic and hastened an end to the lives of those with heart and chest complications. If the patient survived the second day when his temperature could rise to 104° then there was a good chance that he would be well on the way to recovery by the fifth.²¹

The most striking characteristic of the 1918 - 1919 pandemic was its high quota of youthful victims in the 20 to 40 years age group. In comparison the influenza outbreak that struck Europe, Russia, England and Australia in four successive waves between 1889 - 1893 showed high mortality rates among infants and old people.²²

Reports of influenza in Victoria came as early as March, 1890, however, the disease did not assume a virulent form until 1891 when it reached pandemic proportions on a global scale.²³ According to the Commonwealth Year Book, in Australia, 1890, death rates due to influenza per million of population were 130 followed by the epidemic of 1891 where the figure magnified to 739.²⁴ The fact remains that influenza, though not necessarily of a virulent type, had appeared in the Australian community since 1820.²⁵ The 1890 - 1891 outbreak was a derivative of these earlier virus and its containment was due to 'subclinical immunization in the preceding years.'²⁶

The 1918 pandemic on the other hand was a new type of

virus never before unleashed upon the world. Its subsequent mortality rates were therefore staggering. In India, for example, influenza slaughtered five million persons; in Japan, mortality was around five per one thousand of population. Interestingly, in non-European countries the mortality was on the whole higher than in Europe. Burnet and Clark cite as instances the Union of South Africa where per 100,000 of population 826 Europeans and 2,720 non-Europeans died; in Fiji it was 1400 and 5600 respectively. There is a suggestion that climatic factors such as high humidity and low temperatures may have much to do with increased mortality rates.²⁷

In comparison with the rest of the world Australia was only given a glancing blow by the onslaught of influenza. Basically, the highest death rates occurred in those more densely populated areas such as New South Wales and Victoria. The death rates from influenza in the former being as high as 413 per 100,000 of population, in the latter, 329 per 100,000. Tasmania, by comparison, suffered a minor death rate of 177.²⁸

One reason given for Australia's low morbidity may be that those countries affected last by influenza usually experienced a mild death rate. Perhaps this is because the pandemic lost much of its virulence in its march across the globe and with the passage of time deteriorated in its destructive capacity.

Spanish influenza did not actually invade Tasmania until mid-August of 1919. With the disease ravaging the mainland from the early months of 1919 Tasmania had to pass through an extended period of anxious expectation in the hope that the disease would

not reach its shores. However, such hopes proved futile, and an extremely mild form of the disease became apparent in Hobart. One observer calculated that if the flu was to attain the virulence reached on the mainland then the number of deaths in Tasmania during the first six months of outbreak would be 300 (per 200,000 of population).²⁹ The opposite was the case. Tasmania recorded a mere 177 deaths due to influenza during the course of the entire year.

In accordance with mainland figures it was found that the disease in most of the country districts was not so virulent, nor the infection rate so great as in the congested areas of population. In Hobart and Launceston, for example, 65 and 28 cases of death due to influenza were recorded respectively. In comparison areas such as Brighton (one death), Huon (one death), Latrobe (three deaths), and Bothwell (one death), experienced a very mild 'pandemic' indeed. Interestingly enough Zeehan and Devonport, districts of sizeable proportions reported deaths of only 2 and 10 respectively.³⁰ Perhaps this is indicative on a miniature scale of the one consistent, global characteristic of the flu - that its virulence diminished as it travelled from the centre of urban population to that of the outlying, rural districts where population is more scattered.

Tasmania was no exception to the rule that made this particular type of influenza attack the 20 - 40 year age group. During the crisis period of August - September, 1919, it was recorded that 42.5% of the deaths fell in the group from 20 - 45 years.³¹ Another general trend was that a higher proportion of

males were struck down in comparison with females. This is not clearly visible in the Tasmanian figures due to the mild fatality rates of 93 males and 78 women. However, the mainland figures are more conclusive with the death of 7,046 males and 4,943 females for the year 1919.³² This was universal in its implications though not rigorously consistent. For example, a total of 82 males and females, under the age of 20 or over the age of fifty years died in Tasmania due to influenza,³³ though with those in the latter group, old age was a factor in hastening death. Such figures as those which exist in Tasmania can only indicate the world wide trend, though it is not hard to perceive that something is wrong when a twenty year old boy dies instead of his eighty year old grandmother.

Why was this? Had the adult population developed partial immunity due to the outbreaks of influenza in preceding years or was it because the young of the world, the soldier, the nurse, the factory worker, were physically and mentally unable to overcome the challenges of the virus due to the many privations caused by the war? Whatever the reason it is positive that the wretched state of the world and its inhabitants magnified the potency of the outbreak.

Tasmania's experience of the global pandemic was of a very mild nature. Daily life continued in a relatively hum-drum fashion, punctuated by newspaper sensationalism relating to State - Commonwealth conflict or squabbles over quarantine regulations. The relatively small number of fatalities is an interesting fact that bears comment on in the conclusion. Tasmania was very fortunate in

that it did not have to witness the wholesale slaughter of its youth or face an almost total economic stoppage due to lack of a labour force. The mildness of the Tasmanian outbreak makes it suitable as an experimental laboratory for gauging the effects of the flu on the psycho of the public, on socio-economic dislocation, in the field of politics, as a weapon that sets the state against the Commonwealth or council against the State. There is no doubt that the presence of spanish influenza accentuated quasi-nationalistic sentiments and channeled them towards a state of anarchy in which all turned to authority for help and simultaneously blamed them for doing nothing. However, from chaos order emerges. This is true in the Tasmanian situation.

FOOTNOTES

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14. Lake, M.L., op. cit., p.307
15. See Hamlyn, (Influenza, The Post War Killer', in Australia's Heritage. The Making of a Nation, volume 15, (Sydney, 1971) p.1742, Turner, B., 'The Influenza Pandemic', Taylor, A.J.P. (ed)., History of The Twentieth Century. (Purnell, For BPc Publishing L.T.D., London, 1968). p.896.
16. Lake, M.L., op. cit., p.332
17. Shermer, P.R., 'The Influenza Pandemic', P. Young (ed) History of the First World War (London: Purnell, 1971) p.2975; Turner, B., op cit., p.896. Turner states that 'whatever its source..... the virus did not originate in Spain, but since the King of Spain was one of its early victims, his country, by implication was saddled with the responsibility of 'Spanish influenza'. (p.896).

18. Daily Telegraph, 25th February, 1919, p.7.
19. The Study of Influenza: A translation of uchehiye O Grippe by L. Fadyeva and L. Zak Stel'Skaya, Moscow, 1958 (U.S. Department of Health, Education and Welfare, P.H. service publication No. 792) p.5.
20. For Australian figures see Commonwealth Year Book, 1920, which cites that 'of 65,930 deaths which were registered during that year (1919), not less than 11,989 were classified as due to influenza' (p.1128).
21. Medical Annual, (Melbourne: W. Ramsey, 1919), p.202; McQueen, H., op. cit., p.5.
22. Burnet, F.M. and Clark, E., op. cit., p.204.
23. Cumpston, J.H.L., op cit., p.5
24. Commonwealth Year Book, 1920, p.1129.
25. Cumpston, J.H.L., op. cit., p.1.
26. Burnet, F.M. and Clark, E., op. cit., p.92.
27. Ibid., p.75 and p.44.
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CHAPTER ONETHE APPARATUS OF DEFENCE AND CRITICAL RESPONSE TO IT

On the sixteenth of August, 1919, The World headlines read: 'The Real Thing at Last! Influenza diagnosed as pneumonic'¹ So ended a tremendously long and unnerving game of waiting. The Tasmanian public had been anticipating the visitation of Spanish influenza since the last months of 1918 when the disease first began to ravage the mainland states. It came as an almost anticlimax in comparison to the intense psychological fortification of Tasmania's morale through the medium of news papers and Cumpston's assurance that the imposition of rigorous quarantine measures would effectively avert the entry of the disease.² What followed was a show of State-Commonwealth, and to a lesser extent state-municipal antipathy which drove Tasmanians, at the point of one of the most fiery debates, that over shipping, to a bold confrontation with the Federal authorities.

The invasion of influenza came almost as much of a surprise to the government as the people of Tasmania. The government's unpreparedness manifested itself in a variety of ways - in lack of facilities available, inadequate supplies of vaccine, generally a lack of organisation.³ Thus the onus for flu-fighting fell on the individual municipal councils throughout the State. This is the essential characteristic of the outbreak that provides the substance of the unfolding drama. Though this fragmentary attack on the epidemic implies the failure of centralism in reality the opposite is the case. Within the concept of influenza itself, the common foe, as in war, the seeds of unity were being born. This process is

not spontaneous but develops gradually over the period.

In case of spanish influenza breaking out in Australia a conference was called by the Commonwealth government in November of 1918, 'to agree upon a uniform scheme of operations for adoption in order to combat the disease'.⁴ Even at this stage Doctor A.H. Clarke, Tasmania's Chief Health Officer and representative at the conference, was to admit with an almost naive confidence:

'....there appeared to be a very good prospect of preventing the disease spreading to or from Tasmania.... on account of (its) remoteness from other states and the greater ease with which sea transport could be controlled'.⁵

No doubt Cumpston could quite easily be pictured as saying this himself. Important resolutions passed by the conference concerned the checking of public travel, the establishment of vaccine depots, the creation of special hospitals and organizations of ambulance support and nursing assistance. Further, and this is where conflict began to emerge, It was advocated that once a state was proclaimed infected, the Commonwealth was to take control of all inter-state traffic, both by land and sea. It was this resolution that later created the rift between Tasmania and the Commonwealth. The conference also insisted that upon the outbreak of influenza in any state all places of public resort such as theatres, music halls, race meetings and so on were to be closed down. An Advisory Committee was to be appointed in each state and headed by the Chief Health Officer.⁶ In Tasmania it was composed of Drs. Giblin, Lines, Moore, Sprot, Thompson and E.J. Tudor. Clarke took the leading position.

Thus the bare outlines for state action had been established. A further consideration amended the Public Health Act of 1903, 'in

order to extend the special powers of the Chief Health Officer for the purpose of more effectively checking or preventing the spread of this disease'.⁷ In later debates the extended powers of the Chief Health Officer, in combination with the persuasive powers of the advisory board on the public, proved a powerful tool for the State government to wield against Commonwealth 'bullying'.

Local precautions proceeded briskly from the early months of 1919. With the notice of outbreaks on the mainland this process accelerated. However, overall organization and application of measures were poor. That this was a failing of the government cannot be denied. If it had taken control of the situation at this point in time later criticism may have been still born.

Frequent meetings of the local Medical Advisory Committee only came up with such well worn suggestions as the compulsory wearing of the mask and to make an enquiry into whether the disease was carried through the mail.⁸ However, there is a positive side to the story also. Inoculation depots were established which in Hobart alone vaccinated 203 people in the first two hours of opening.⁹ V.A.D. and Red Cross workers offered their assistance to the government and the co-operation of the Police Department was utilised to prevent illegal landings on Tasmanian shores.¹⁰ In February a special hospital was equipped for use by Hobart at the Claremont camp. In Launceston, the hospital at Carr Villa was equipped for similar northern requirements. In addition the home for contacts at Glen Dhu was to be refitted and ready for emergency use.¹¹ Early in February the Claremont isolation camp was added to by one on Barnes Bay, North Bruny Island. It was felt that the isolated location of that island was more conducive to the

containment of the disease.

Further measures concerned inter-state quarantine. Passengers leaving Tasmania for other states were to submit themselves for medical examinations twice at intervals of not less than forty-eight hours within a time lapse of three days.¹² One major set back of this scheme was that passengers from the North West and other less accessible parts of the state who wished to leave Tasmania had to travel to Hobart or Launceston in order to gain a 'clean bill of health' and thus a permit to travel. This situation was later alleviated by the opening of further surveillance centres such as in Burnie but not before much heated criticism was levelled at the state Health Department.

This is a consistent theme of the period. The government constantly came under attack whether from the public, the municipal councils, the opposition or the Commonwealth. However, such criticism, though sometimes petty, was not always destructive, but awakened the government to the need for a reassessment of policies, that, in the main, concerned quarantining. Such a reassessment could benefit all. On the other side of the coin criticism revealed governmental laxity in applying or the non application of quarantine regulations. In other words the government's unpreparedness was highlighted.

Tasmanians were angry and flustered at the fact they had to secure permits to leave a clean state. They watched with impatience the absurdity of one doctor examining a roomful of passengers when it was obvious that they were all free from the flu.

It was as The World state a game of 'Round and Round the Mulberry bush, but all the while being bound and gagged with red tape'.¹³ However, the farce continued to expand to monstrous proportions when it was announced that it was necessary to charge an impost for quarantine expenses when travelling from a clean state. It was complained that one woman with a child had to pay £10.10s. in excess fare while a fourteen year old boy had to pay a fare of £5.7.6d.¹⁴

A letter by W.E. Shoobridge is one of the best critics of contemporary quarantine inconsistencies. He cites numerous examples of possibly infected persons walking on to uninfected ships or vice versa. The last case that he describes reveals the laxity, if not criminal negligence of the quarantine administrators:

'I noticed that on the last day just before we sailed that the attendant who came on board to superintend it, came straight from an infected ship and mixed with the crew and passengers, within twenty four hours we were in Tasmania and might have brought the infection with us. Every day boats and steamers came alongside with mails, officials and provisions and there was no attempt at isolation'.¹⁵

On Bruny Island quarantine was equally as lax. Troops who passed through this isolation center were supposedly to be kept under strict quarantine confinement. However, there was little or no attempt to keep them under surveillance and they wandered about the island as they wished and if infected passed it onto the Bruny populace. A deputation to Clarke pointed out that if the soldiers were safely guarded and kept within the quarantine area there would be no need at all for isolating any other part of the island - thus alleviating the danger and considerable commercial loss of Bruny inhabitants. This was one of the points that was later acted upon and many restrictions were removed from the Bruny

populace and entitled them to greater freedom of movement.¹⁶

If these issues were not enough to set the Tasmanian public on fire then those of the mask and inoculation were. The former, because it was uncomfortable and impracticable, for example, when one is eating; the latter, because of its fallibility as a curative and the fact that many resisted it in any form because impure batches of serum still caused occasional mass fatalities.¹⁷

Cumpston defended the mask for a variety of reasons but mainly because it gave a sense of protection to nervous persons.¹⁸ One doctor criticized the wearing of masks on the grounds that it was farcical because in the fresh, open air and sunlight the mask cannot be a protection either against the exit or entrance of the flu germ. Secondly, it was dangerous because all those who wear masks are condemned to rebreathe the vitiated air after it is expelled from the lungs. He concluded: 'Besides muzzling the people in the unhygienic mask what has the government done in a big way?'¹⁹ A critic in the Huon Times alleged that:

'a large meshed fishing net bears about the same size relation to a swarm of flies as the common gauze mask bears to the influenza germs it is supposed to stop'.²⁰

Even so, the mask was eventually adopted in Tasmania and by February of 1919 it was compulsory to wear a mask in a public place or conveyance under the threat of £10 maximum penalty.²¹ This measure was not rigorously enforced until the actual outbreak of influenza in August when constables were instructed to take the names and addresses of those not wearing masks in a public conveyance.²²

Masks were quickly snapped up by the public and the

government found it extremely difficult to keep up the demand. As a consequence a black market became established and profits soared to 50% higher than the flat government rate of 1/- per mask. When his attention was drawn to this fact the Acting Premier (Mr. W.B. Propsting) replied that he would not act to subdue profiteering because the public had already been informed that it could purchase masks from the Health Department at 1/-.²³

If the general public were aware of the pitfalls of the mask then they were obviously prepared to overlook them in acquiring the 'psychological' security they afforded. Another proposed variant of the mask was the affixing of formalin to all telephones in Commonwealth offices or banks as a precaution against the influenza germ.²⁴ Though the odds against the mask were formidable it readily became a physical appendage of most Tasmanians who cared about their own general well being. Its capacity as a flu preventive, however, left much to be desired.

Inoculation proceeded at a brisk pace but was frequently interrupted by irregular supplies from the mainland. In the latter part of January, 1919, Hobartians and surrounding inhabitants gathered in hundred's to have their flu 'shots'. Such was the unprecedented demand that the doors of city hall were closed at 1 p.m. leaving many waiting in the streets to be inoculated.²⁵

Once again the Department of Public Health proved the scapegoat. One contemporary observed that even though the Health Department knew that there would be a rush for flu 'shots' they handled the operation by highlighting their inefficiency and ability

to bungle what was a relatively simple task. No provision was made to regulate the work and to make matters worse only one surgeon was in attendance. The scene was described as such:

'People crowded into a room on the first floor like sheep - women, children, men, girls indiscriminately....the doctor (was) jammed against the back wall hemmed in from every side. The air in the room was stifling and moist and people were fainting.the health authorities should realize that respectable women do not care to take their blouses off before a room full of men'.²⁶

Such criticisms inspired the Health Department to move the venue of the vaccine depot from City Hall to the Mayor's court room where the task could be approached in a more orderly manner.²⁷

In the country the opposite was the case. Lack of vaccine forced many to travel to the major inoculation centres in Hobart and Launceston or go without. One observer credited such a state of affairs to the fact that the government had failed to accumulate a store of inoculation supplies in the preceding months. Only the invasion of influenza prompted the beginnings of this process. Some of the larger industries, notably zinc and textiles, took the matter into their own hands. Arrangements were made for medical teams to carry out mass inoculations on the job. In some cases firms tried to make inoculation compulsory under the threat of dismissal.²⁸

The value of inoculation as a flu preventive was a topic of widespread discussion with little or no conclusive answers. Cumpston claimed that inoculation should be more widespread and based this on some vague mathematical assertion which indicated that the ratio of deaths in the inoculated and uninoculated groups were 5 to 24.²⁹ In late 1920, Dr. W.Y. Armstrong, a N.S.W. doctor, gave

a better researched and conclusive evidence in that profession's official organ. He estimated that of 11,972 patients, 4,155 had been previously inoculated, while 6,249 had not. The mortality among the inoculated was 10.7% and among the uninoculated 16.5%. Further, the mortality of those inoculated three times was 8.2% as compared with 11.1% among those inoculated once only.³⁰ Burnet and Clark acknowledged the value of inoculation but in a later edition with D.O. White concluded that vaccine reduces one's chances of catching influenza by one half.³¹

Quarantining also had political implications, federally and locally. Conflict between Commonwealth and State during this period was intensified by the various states unwillingness to co-operate with the Commonwealth on the matter of quarantine. Tasmania complied to a point but finally broke with the Federal authorities in April over shipping. The background to this drama was set in a unique emotional response to influenza, mainly advocated by The World - that of total isolation. Both issues were emotional, both were prematurely conceived, and both furnished fuel to the fire of the other. Total isolation, however, emerged from the abstract to be utilised by the labour party as a weapon against the Nationalist government.

Conflict between Commonwealth and State demonstrated the extent to which the previously negotiated agreement had been corrupted. The thirteen point resolution of the November conference of 1918 gave some cohesion to a shaky federal unity as many of the points were to do with interstate quarantine. It was the fifth point that was to later prove 'the gum in the works'. This allowed:

'that upon the proclamation of any state as infected, the Commonwealth government should take complete control of all inter-state traffic, both by land and sea, and that the states should render to the Commonwealth every possible aid, and co-operate in the effective carrying out of the regulations'.³²

The act turned out to be a complete farce and the Commonwealth government was never more than tacitly in charge of quarantine.

The various states, as McQueen emphasizes, favoured a free-for-all and bent quarantine regulations as they wished within the confines of their own borders. There was little or no appeal to a centralist policy at this time.³³

The question of Commonwealth control came to a head in Tasmania at the end of April, 1919. Prime Minister Watt threatened to withdraw steamers from the Bass Strait service unless the Tasmanian government agreed to waive its restriction of seven days maritime quarantine in favour of five. Such further diversion of shipping would have proved disastrous for the ailing Tasmanian economy. Watt's ultimatum intimated that Tasmania had broken the agreement entered into by the November conference and thus was selfishly adding impetus to the national emergency.³⁴

The Tasmanian public retorted with vengeance and inspired the Premier. Lee's reply to Watt seized the essence of public emotion:

'....by diverting shipping from Tasmania as proposed..... this state (is) already reduced to a minimum, wheat supplies almost exhausted, large quantities of potato and fruit decaying in the orchards. Any further withdrawals of shipping would be disastrous to producing and commercial interests. The state government realizes the seriousness of the position but insists on protection....we have only sea communications....'³⁵

Papers such as The World and The Mercury were especially critical of Watt's act and judged that interests (commercial?) other than the

lives of people were influencing him and his advisors.³⁶

Meetings were held in Hobart, Launceston, Devonport, Kingston and many other municipalities to reject Watt's proposal and pledge full support behind the Lee government. It was generally agreed that the disease had got into the Commonwealth through the careless application of quarantine regulations. Tasmanians were not going to let the same thing happen in their State.³⁷ It was equally clear as Mr. J.H. Cleary, M.H.A. suggested, that the interests of commercialism lay at the bottom of the question and if the local government allowed commercialism to pull the strings thousands of lives would be lost.³⁸ Watt's reply to this public furor and Lee's telegram calmly asserted the need to allow ships greater mobility in order that:

'....they should be used to the best advantage in preventing unemployment, misery and distress falling upon the whole community'.³⁹

A meeting of the Tasmanian Advisory Committee reflected the earlier arguments against submitting to federalist tyranny. It proposed seven points which, in essence, whole heartedly backed the government's stand against the Commonwealth. These included, seven days quarantine to be adhered to, passenger traffic to be restricted as the situation necessitated, persons embarking from an infected state to be examined before coming to Tasmania. The last three points related to the accommodation of special wharf lumpers for inter-state vessels and the adviseability of preventing passengers leaving Tasmania who would be returning within six months.⁴⁰ It is possible that political intrigue had a hand in the machinations of this question but never-the-less Tasmania never faltered in its stand against the Commonwealth and was rewarded by a low mortality rate and

the postponement of the onset of influenza until the third week in August.

Intra-state conflict was not as colourful as that encountered in the federal sphere. Nor was it widespread. However, it demonstrated that even on a local level the various municipal councils did not intend to pay homage to the whims of the state government when it specifically ordered them back on their own resources in order to combat the disease.

An editorial in The Advocate is typical of current local opinion:

'it is obvious that the State Health Department is doing absolutely nothing, beyond issuing instructions and writing letters to keep the influenza scourge out of Tasmania. Each local authority has to rely on its own resources, not merely in the matter of prevention, but in the treatment of the disease should it occur. Each municipality must be prepared to take in hand the necessary arrangements, otherwise nothing will be done'.⁴¹

Perhaps this was rather harsh but it did reflect the antipathy that was sometimes apparent between the state government and the local councils. The Zeehan and Dundas Herald held a similar view and criticized the Tasmanian Health authorities for playing a game of chess in which it was waiting on the mainland's move.⁴²

One of the most heated local debates was over the matter of expenses incurred before and during the influenza outbreak. Animosity intensified when the government appeared reluctant to cover council expenditure. In a telegram to the local authority at Ulverstone Clarke wrote:

'It is impracticable for this Department to undertake the responsibility of local hospitals throughout the state and each council should organize in its district

'for the protection of the local people. The expenses of such organization must be borne by the councils themselves'.⁴³

However, this stand changed. Already overburdened and impoverished by months of flu preparations and maintenance of isolation centres the municipal councils proved a powerful lobbying force which finally persuaded the government to assist in their financial obligations. The government decided to refund all expenditure over and above the amount that could be raised by the imposition of 2d in the pound upon the value of all rateable property within each district.⁴⁴ The expenditure of Hobart amounted to £3,216.18.11 while that of Brighton a mere £37.11.5 or Esperance £33.3.0.⁴⁵ The government further undertook to recoup the Red Cross societies of Hobart and Launceston as long as their expenses were incurred under direction of the Public Health Department.⁴⁶

Arguments between council and committee were isolated events but never-the-less occurred. In the Huon various committees formed there after the outbreak of influenza almost usurped the council's powers by assuming control of the South Bridge Hospital. The council retorted by stating that the committee may have to accept responsibility for anything they do which is not authorized by the former body. The debate was not concluded until a month later. The local council issued a statement which outlined the functions of committees as appendages of the council which were to aid in relieving distress and act as an advisory body to the council. It also explicitly stated that the committees must not incur any expenses without the council's sanction.⁴⁷ Such confrontations resembled what had already occurred in the Federal sphere and highlighted the emotional tension of the time. That the Huon committees were unsure as to the extent of their powers must point to a critic of the local council's failure

to outline a plan of action and the subsequent role of committees within that plan.

On the whole local dissension was minimal and the period revealed no serious rifts between council and State government. If they did occur they were quickly compromised. Dissatisfaction arose mainly out of the strict enforcement of regulations in areas that were free of influenza - such as Launceston, after the outbreak in Hobart. In relation to this point protest also occurred when the Health Department refused to lift quarantine measures pending further outbreaks. Zeehan, for example, under strong protest, had to continue with quarantine until December.⁴⁸ In the long run municipal councils were too busy preparing for the flu in their own district without combating the State Health Department. If centralism did not exist then influenza suppressed any further fragmentation.

The fact that Tasmania had postponed the penetration of influenza for months after it had become virulent on the mainland added impetus to a policy of strict isolation of the State. 'No landings' was a policy advocated by The World as early as January, 1919, and was consistently followed through in a bull-headed and stubborn fashion until the actual outbreak of influenza in August. Such a stand had blatant political dimensions and was used by the labour party to manipulate the emotions of the time against the Nationalist government.

A peculiar aspect of the isolation conflict, which reinforces the above notion, was that out of thirteen or fourteen current newspapers only The World and a handful of others advocated it as a serious method

of action. The Launceston Examiner in a more realistic approach pointed out that complete isolation from the mainland would lead Tasmania into conflict with the Commonwealth over the agreement reached at the November conference. Further, and this appeared to be a very fundamental point overlooked by The World, under the policy of 'no landings' it would have been extremely difficult to make arrangements for the return of Tasmanian soldiers.⁴⁹

According to The World, complete isolation of the State was a policy that was gradually becoming to be recognized as the only effective method of keeping the disease out of the State. It further implicated Ulverstone, Wynyard, Devonport and 'to a degree Launceston' as swaying in the direction of this policy.⁵⁰ However, my research of the local papers reveal no such conclusions. The World merely assumed the case was such for its own political purposes.

Dr. Clarke, too, was of the opinion that total isolation was a negative policy. Firstly, because maritime quarantine law forbade it and secondly, because he felt that seven days quarantine was ample safeguard.⁵¹ The World could only proclaim:

'....if it does get in then the authorities and government have let it in, for nobody denies that with isolation instead of regulation it could not get in.'⁵²

Premier Lee took the view that to isolate the State would merely aggravate the already tense Commonwealth, State situation. Further, it would lend impetus to the economic deterioration of Tasmania and create unemployment in its wake. Acting upon the advice of Clarke, Lee thought it best not to contemplate taking any further precautions which would add to the hardship experienced at the present time.⁵³

Complete isolation of Tasmania was never a realistic approach to the situation and not many took it as such. Basically, it would have been impossible for Tasmania to survive months of isolation from the mainland without essential commodities such as wheat, flour, coal, and most important, communication with the outside world. 'No landings' was a political tool wielded by the Labour party to discredit the Nationalists in the coming May election. Their attack, at times desperate, had somewhat a shallow ring. Voters were not so easily fooled and subsequently returned the Nationalist with a huge majority.⁵⁴ That the Nationalists at least attempted to come to grips with influenza was a point in their favour. The Labourites merely criticized.

Such is the background to the outbreak. The story after this period is that of the strengthening of quarantine measures. The outbreak of influenza reveals the effectiveness of their application to a reality and vice versa. Criticism flares but is never protracted and concerns, in the main, the inconsistencies of quarantine measures.

On August the sixteenth when Tasmania was proclaimed to be 'infected' all libraries, schools, theatres, picture shows, public halls and other places for indoor resort or public entertainment were closed. Religious services were allowed only under certain conditions. Forms of outdoor amusement such as military parades, races and football were prohibited. Hotel keepers were warned that the number of persons allowed in bars at any one time were three and this was for only a period of five minutes.⁵⁵ The public was thrown on the offensive by this shock enforcement of quarantine regulations - almost at once critical retorts began to flare.

The local paper at Launceston rallied at the government for not fully explaining the implications and extent of quarantine regulations. It further pointed to the inconsistencies inherent in many of these measures. For example, it cited the closure of billiard rooms, which are large and well aired as a complete antithesis to the more frequented cafes being allowed to remain open and to as many customers as they chose.⁵⁶

Clarke did not escape this critical furor. One paper compared an earlier remark of his when he confidently proclaimed that Tasmania would not be affected by influenza with another which indicated that 'he was not surprised to find that it had arrived'.⁵⁷ The fact that influenza had been discovered in the centre of population nearest the quarantine station did little to strengthen the position of Clarke in this matter.

Hobart was to be divided into six areas, with separate headquarters and staff, composed of a sanitary inspector, a clerk, two nurses and an area medical officer. There was also a 'comforts committee' composed mainly of V.A.D.s who undertook to assist at the homes of patients. Launceston was divided along similar lines but with only four districts.⁵⁸ In the country municipal councils across the state organized their own particular battle against the flu, fitting only loosely in the medical hierarchy headed by the State Health Department.

Patrols were established to guard against contacts mingling with the public. It was also proposed to establish a creche to take care of the children whose parents were ill. Elizabeth Street State School

provided accommodation for the first cases of influenza while alleviating the influx expected at Claremont. After Launceston's first attack of the disease on the twenty-second of August it was decided to utilise the Wellington Square State School for hospital purposes - the reason being that Carr Villa was too distant from Launceston to be an effective emergency hospital.⁵⁹

Additional nurses were employed at five guineas a week, notably, a guinea more than their mainland counterparts and two and half times the wage of a matron. This was 'danger money' and induced many to overcome their fears for material benefit. There is no doubt that nurses well deserved their wage as they worked in cramped, often dirty conditions, among mortally sick patients who could and sometimes did pass the dreaded disease onto them. Tasmania was fortunate in that the mainland experience, its doctors and nurses could be passed on to it and allocated to those districts where there was a shortage of staff. The Annual Health Report, 1919 - 1920 concluded:

'one is safe in assuming that the number of cases and mortality would have been considerably greater if we had to rely upon our own resources'.⁶⁰

Owing to the precarious nature of volunteer and nursing work local authorities were urged to accept individual responsibility in the matter of compensating for loss of life.⁶¹ The Australian Provincial Assurance Company offered to insure the lives of voluntary aids and nurses in the Ulverstone district at a premium rate of £2.15 per 100 for twelve months on the condition that the risk be confined to Tasmania and the age of the insured did not exceed thirty-five years. By September, 1919 the premium had risen to £4.18.6 per 100 insured.⁶²

Once influenza had gained entry Tasmania's staunch seven days isolation was amended to three days surveillance after prior inspection. Ships reaching any Tasmanian port were allowed to come straight up to the wharf rather than go into isolation at Barnes Bay. However, passengers leaving the State were still required to obtain medical permits prior to departure.⁶³ As the flu progressed and passed over its critical stages further restrictions, such as those on the mask, public gatherings and religious services were pulled down until a relative norm was superimposed on the dislocation left by the advent of influenza.

Complaints of State unpreparedness were justifiable in one sense. The Tasmanian health authorities being well aware of the virulence of the epidemic on the mainland should have more ably prepared Tasmanian defences for the ensuing plague. For example, a few days after the outbreak of influenza it was reported that patients were being refused admittance to the Elizabeth Street Hospital because of lack of staff.⁶⁴ Measures that had been formulated late in 1918 and early 1919 were now applied in what appeared to the public as desperate 'emergency regulations'. However, the Health Department could not enforce these principles until influenza actually emerged within the State. Otherwise social and economic dislocation would have been much more serious.

Many quarantine regulations were inconsistent=granted! Not even the mainland was free from this complaint. Perhaps Roe confronts the problem when he theorises:

'in any crisis men ask where the blame lies; they often go from that to attack....a scapegoat is sought....'⁶⁵

The local health board was indeed the scapegoat with Clarke as the

focal point of consistent abuse. Cumpston offered another and entirely viable alternative:

'The difficulties in connexion with the control of this epidemic was very materially enhanced by the attitude of portions of the daily press, which adopted and forced upon the public a panic attitude which has not, at any time, been justified by the events and adopted a sensationalism which seized every occasional incident to increase the public apprehension'.⁶⁶

The development of quarantine regulations in Tasmania was a matter of 'hit and miss'. Municipal councils resembled somewhat their federal counterparts in that they bent quarantine regulations to suit their own purpose. This did not lend impetus to unanimity of policy direction or decision making. Quarrels broke out, not so much between council and council but council and State Health Department. These were quickly reconciliated. Many critics, especially Labourites, pounced upon the inconsistencies of quarantine regulations as a lever to expose the failings of the government. However, even they must have acknowledged that the Health Department kept influenza out of Tasmania for over seven months - was this inconsistent?

Commonwealth, State wranglings were a common occurrence of this period. Tasmania was quite fortunate in having only one major confrontation with the Federal authorities. Premier Lee's stand against Watt was essentially emotional and in its wake intensified the shipping problem and economic dislocation. Against this it also prevented an acceleration of the inevitable influenza invasion. Perhaps the arrogant nature of the Commonwealth forbade co-operation. It was typical that a State should stand up to the bullying tactics of a government bloated by the assumption of many state powers, which it had not returned, during the course of the war. According to B. Berzins this was one of the major reasons why there was a tendency

towards State, Commonwealth conflict, with a further consideration that the war had fundamentally altered the terms of Federal-State relations.⁶⁷ Thus if Tasmanians were temporarily disunified over influenza they united in common opposition to the Commonwealth.

Others were more optimistic and sort to discover the benefits and perhaps lesson that may be derived from the epidemic. It was this minority of opinion that envisaged a swing from the current 'muddle through' policy to that of a centralist nature. The Advocate concluded:

'....if the epidemic succeeds in placing the Health administration of the Commonwealth upon a permanently efficient footing, it will have brought good as well as evil in its train'.⁶⁸

FOOTNOTES

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3. Interview, J. Reynolds.
4. Department Public Health, Annual Report (1919 - 1920), Journals and Papers of Parliament, Vol. LXXXIII, No.40, p.9
5. Clarke to Chief Secretary, 29 November, 1918.
6. Clarke, A.H., Department Public Health, Annual Report, 1918 - 1919, Journals and Papers of Parliament, LXXXI, No.35, pp.11 - 12.
7. Ibid., p.11.
8. World, 31 January, p.9
9. Ibid., 30 January, p.5
10. Ibid.
11. Premier's of Fice Records, 14 February, 1919, Vol.337, 1919
12. World, 12th February, p.6.
13. Ibid., 15 February, p.3
14. Launceston Examiner, 28 February, p.5
15. Shoobridge to Clarke, 25 April, 1919, University Archives.
16. Mercury, 21 February, p.3.
17. See H. McQueen, 'The Influenza Pandemic in Australia, 1918 - 1919, unpublished article, 1973, p.7.
18. Cumpston, J.H.L., op. cit., p.114
19. World, 18 February, p.6.
20. Huon Times, 4 April, p.3
21. Mercury, 3 February, p.5
22. Ibid., 20 August, p.5
23. World, 4 February, p.5
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34. World, 17 April, p.6.
35. Lee to Watt, Premier's Office Records, Vol. 337, 1919
16 April, 1919.
36. Mercury, 24 April, p.4.
37. World, 25 April, p.6.
38. Ibid., 24 April, p.6.
39. Ibid.
40. Mercury, 30 April, p.5.
41. Advocate, 3 February, p.3.
42. Zeehan and Dundas Herald, 26 February, p.2.
43. Clarke, to Ulverstone Authority, Ulverstone Health Records,
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44. Department Public Health, Annual Report (1919 - 1920),
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45. Ibid.
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48. Mercury, 3 December, p.5.
49. Launceston Examiner, 17 February, p.6.
50. World, 19 February, p.2.
51. Ibid., 20 February, p.6.

52. Ibid.
53. Ibid., 22 February, p.6.
54. Ibid., 2 June, p.2.
55. Ibid., 18 August, p.5.
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60. Annual Health Report (1919 - 1920) No.40, Journals and Papers
of Parliament, Vol. LXXXI, p.1.
61. Premier's Office Records; op. cit., 7 February, 1919.
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CHAPTER TWO

SOCIO-ECONOMIC DISLOCATION

The enforcement of quarantine regulations in Tasmania occurred as early as February, 1919 and continued until December of that year when the virus had practically exhausted itself. Ironically, it was not altogether the disease itself which accentuated socio-economic dislocation but the regulations manifested to impede its progress.

Most sectors of the Tasmanian economy were affected but those which relied on shipping, such as the fruit industry, felt the blow hardest. Apples awaiting shipment rotted by the ton as commercial and health interests clashed. Businesses such as banks, department stores, the tramways and railways continued to work short staffed or closed down altogether. The police department and the fire brigade reported serious loss to their potential as working units. Unemployment soared as enraged proprietors of theatres, billiard rooms and hotels were forced to close down due to influenza regulations and dismiss their employees. Matters were worsened because steamer fares and freights to and from the mainland increased by fifty per cent due to the dislocation of passenger traffic. Wheat, flour and coal shortages occurred which temporarily deprived communities of the basic luxury commodities. In the background of this was the foreboding of the national seaman's strike. The strike began in Victoria early in 1919. 'Dog kennel accommodations' and higher wages were the main points of dispute. The sailors eventually gained sympathisers in all parts of the Commonwealth and set the tone for a protracted shipping strike.¹

Lack of shipping was felt first and foremost by the fruit industry. A paradox intensified this inadequacy. Though the boats and their cargo were free of the virus it was almost impossible to take shipments back and forth between 'clean' and uninfected states without human contact.²

As early as March of 1919 deputations of commercial and shipping interests were being sent to the local head of quarantine, Dr. A.H. Clarke, complaining of quarantine regulations. Such delegations expressed a desire to relieve the congestion of cargo, particularly that of perishable fruits, that a wharf should be set apart exclusively for the unloading and loading of cargo and that regulations were not ^{to be} pulled down but merely elasticized:

'each speaker was careful to point out that the restrictions should not be relaxed at the expense of public safety'.³

A further recommendation of the commercial pressure group consisting of R. Crosby of the Marine Board, Sir Henry Jones, C.E. Webster, A. Ashbolt and M. Kennedy, F.H. Peacock of shipping exporters and Alderman Lamprill, insisted upon the use and isolation of the Port Huon jetty for steamers to load and unload produce. Such a proposal was rejected by Clarke and so too the idea that the King and Queen piers at Hobart be fenced off and used as points of departure.⁴

This demonstrates the extent to which the government was prepared to go in isolating Tasmania from the infection exhibited on the mainland. With elections two months away this was a gamble, if not a brave and sincere stand.

Fruit grower's concern over inadequate shipping came to a head in mid April of 1919 when a 'monster' meeting was held in the

Franklin Town Hall, Mr. D.E. Ryan, who presided, stated at the outset that, 'the meeting had no political significance' but went on to criticize Federal inactivity in the matter. It was felt that the position of the fruit grower was precarious enough without the pitiful wastage of apples rotting in the orchards or on the wharves.⁵ However, such meetings were usually full of 'hot air' and did very little of a concrete nature. They merely provided the locals with the idea that something was being done. One solution offered was that the fruit growers themselves should charter a boat to alleviate the burden of the usual steamers which were booked six times over in reference to their available space.⁶ In face of current quarantine regulations such a scheme, if at all feasible, would have been quickly quashed or, with a similar result, came under government jurisdiction. Periodic shipments of apples and other fruits were arranged by the government but never on the scale that the fruit growers wished. The result was huge losses in the fruit industry and many of the finest apples instead of being passed along markets all over the world ended up as cider for home consumption.

The shipping shortage manifested other, derivative problems. Wharf labourers became victims of a red tape force far beyond their control. Due to the high number of water frontage workers in Tasmania their sudden loss of occupation quickly aroused the government to activity. It was proposed that the government push ahead with public works in the Northern part of the State where unemployment was the highest and offer wharf labourers temporary positions. By early February these men were working on road works at the Great Lake as well as Prosser's Forest and Conden's Road's in the

St. Leonard's area.⁷ However, many remained unemployed until the resumption of normal shipping in August. The situation was not critical but in combination with the seaman's strike it may have reached a fiery head. That the government improvised a quasi-R.E.D. scheme may have saved it further loss of face and provided a temporary stop gap with deteriorating labour relations.

If unemployment on the water front was not problem enough then that of the nation wide seaman's strike affected Tasmania both politically and economically. The strike persisted until 1919 and recorded the highest ever man days lost through industrial disputes in Australian history.⁸ Tasmania was to experience the backlash of this conflict but in combination with quarantine regulations it proved a serious threat to economic stability.

As far as local unions were concerned it was not expected that they would be called upon to take any action or participate in the strike as such. It was obvious that if ships did not run then they would have no work. All that a meeting of the Hobart Chamber of Commerce could offer was to call for an assurance from the Federal government, 'that the shipping services would be maintained, and insist upon the unions concerned to submit the dispute to the arbitration court'.⁹ Much heated discussion ensued as to an alternative from seaman's strikes and dislocated shipping.

One letter to The Mercury asked why it was not possible for Tasmania to own and control a fleet of large overseas steamships?¹⁰ In June of 1919 a meeting was convened at the Launceston Chamber of

Commerce to discuss the viability of State ship building. It was at this meeting that Mr. W.R. Bell, consulting engineer to the Burnie harbour works stated:

'There are forces at work against the progress of Tasmania as an industrial community, particularly against ship building'.¹¹

What these 'forces' were is not enlarged upon. This was not the only reference to the need for Tasmanian ship building. In February of 1919 it was urged that a boat be either built or chartered to carry sugar to Tasmania.¹² The cry for Tasmanian owned ships appeared to emerge at a time of economic crisis, falter and die once the crisis period had passed. Even if ships had been prepared for local use they would still have been subject to Federal and local quarantine regulations. However the case, after the April crisis, the majority of Tasmanians, save the commercial interests, preferred the diversion of shipping rather than relaxation of quarantine controls. In face of the influenza threat all were unanimous on the need to preserve the general well being of the people first and tend to the needs of the economy second. By the out-break of influenza in August when normal sea traffic was resumed all notions of Tasmanian ship building were dropped because of the great expenses involved.

Economic deterioration persisted. In May reports of wheat and flour shortages came from all over the State. The wheat situation was alleviated to some extent by the arrival of the Kiltobanks from Melbourne laden with 3,000 bags.¹³ Coal was sorely missed and the government called on people to economise in this matter.¹⁴ Petrol rationing became established.¹⁵ Lack of coal was also felt in industry where two out of the three Mount Bischoff Tin Mining Company's

smelting works were put out of action.¹⁶ A large shortage of sugar supplies was directly attributed to the interruption of the Sydney steamer service.¹⁷ Shortages on the home front were bad enough in itself but to jam producers it was disastrous. Henry Jones of Jones and Company fame complained that unless more supplies were obtained he would have to shut down his factory.¹⁸ In view of the great fruit losses already incurred by growers if the factories closed their doors to them then their year may have been futile labour. Fortunately, this position was alleviated by the shipment of 250 tons of sugar from Melbourne to be closely followed by an additional 600 tons from Sydney on the Oonah.¹⁹

The effects of spanish influenza and consequent regulation enforcement was disastrous for the Tasmanian tourist trade. Mr. E.T. Emmett, Director of the Tasmanian Tourist Bureau, calculated that if each tourist had spent £15 in Tasmania then the total loss to the State would have been in the vicinity of £150,000.²⁰ Outbreaks on the mainland and the enforcement of quarantine regulations in Tasmania assured the loss of the expected 10,000 in tourist traffic. The suspension of the Loongana service accentuated matters.²¹ Even by early March practically all prospective tourists had cancelled their visit. Subsequently, Tasmanian tourist advertising on the mainland was called to a halt and staffs dismissed.²² It is hardly likely even if the epidemic left Australia within the next few months that the trade would have resumed at full strength. As the Director of Tourism concluded:

'....the tourist trade (is) done for this season.... we can only look forward to brighter prospects of the future'.²³

The suspension of tourist traffic also had implications for those tourists already on the mainland or in Tasmania. In combination with a fifty per cent increase in steamer fare it was almost impossible for them to return at an early date to their point of departure.

Large numbers of business men were unable to return to the mainland or vice versa. Those on holiday had to extend it, either because of lack of shipping or because they did not possess the amount to cover the increase in fare. One lady with children had to take in sewing in order to raise the fare to Melbourne as she objected asking for charity.²⁴ Much dissatisfaction was aroused because of the government's failure to intervene at an early date to aid such misfortunates. The problem, as with shipping was directly attributable to the strict enforcement of quarantine regulations.

The dilemma lay in the fact that steamer communication between Victoria and Tasmania was restricted to once instead of three times a week. Additional quarantine stayover losses compelled shippers to impose a surcharge above normal costs to even out cost and profit margins. Many protests were made to the Federal authorities. The line of argument was that since Tasmania was a clean state it seemed inconceivable that shipping companies should be allowed to place an imposition of £3.10s. per head on passengers leaving between Launceston and Melbourne.²⁵ An example cited was that a man who had taken his wife and children to Melbourne was compelled to pay £17.10s. in extra fares.²⁶ If this type of expense annoyed those stranded in Tasmania or the mainland it was enough to give the tottering tourist trade the final push.

Meetings of stranded tourists both in the mainland and Tasmania placed considerable pressure on the Federal and local authorities to alleviate the problem. Many had been placed in a position of financial embarrassment because of their forced stay and increased fares made immediate return almost out of the question. Tourists petitioned the State's Tourist Bureau in an effort to gain compensation only to discover that it was not empowered to afford any practical help.²⁷ As far as the likelihood of possible future shipping was concerned all that could be offered was, 'a berth as soon as circumstances permit'.²⁸ From a commercial point of view many owners of vessels thought it a profitless venture to return what they considered a mere handful of passengers. Crews also were proving rebellious and asked for heavy increases in wages if extra trips were necessary.²⁹

Relief was finally afforded when it was decided that application could be made to Charitable Grants Department for compensation. Individuals could borrow from this Department to pay for board and lodgings as well as their return trip. The system was eventually adopted in all states. Repayment was on the basis that the individual reimburse the borrowed amount to his own State and it was subsequently passed onto the Tasmanian authorities.³⁰

In addition to this the governments of New South Wales and Victoria petitioned the Tasmanian authorities to relieve stranded tourists from their respective states by providing orders for board and lodgings up to thirty shillings a week and passes home.³¹ In late February the Oonah was chartered to return about 200 tourists to Sydney. This relieved much governmental anxiety but not the problem.

Tourists were periodically shipped to their points of departure up to and after the outbreak of influenza in August. The problem was such that not even the government could change quarantine regulations to alleviate it. It did, however, set by £550, 'to meet expenses connected with persons stranded in Tasmania'.³²

Industry was also affected. Following an increase in steamer passage it was decided that freights should rise substantially. One contemporary observed that before the outbreak it cost 11/- to send one ton of goods across Bass Strait but now 18/6 was the rate charged.³³ An enquiry into the matter headed by Senator Baklap proved totally ineffective. Admiral Clarkson, the representative of the shippers Holyman and Company, advised that the increase in freights was due to the heavy charges imposed by the quarantine authorities. A vessel detained in ten days quarantine was at a cost of £234.7.10. in expenses. This amount was equivalent to seventy five per cent of the ship's freight earnings for that particular trip.³⁴

That shippers had to personally bear the expense of quarantining and sit idly by as their vessels wasted time and money in isolation centres added to their resentment of state quarantine regulations. It was felt that such costs should be borne by the Commonwealth Government.³⁵ Many shippers had cut back on the number of vessels at sea and in one particular instance a company was able to make only a trip and a half per month instead of four under normal conditions.³⁶ Sending shipping to Tasmania was coming to be regarded as a profitless exercise and many diverted their vessels accordingly. Thus shortages in consumer and industrial products

were inevitable.

King Island inhabitants fared little better. Interruptions to the island's shipping had produced a huge waiting list for embarkation to Melbourne. Agitation climaxed when it was discovered that the S.S. Koomeela was permitted to book passengers for Melbourne but at the exorbitant rate of £5.10.6 per head. Considering that the island is only about seventy miles from Point Phillip Heads it is little wonder that the inhabitants were in an uproar. A further cause for grave concern was that transportation of local products such as butter and cheese had been delayed because of shipping problems and the King Islanders were under unnecessary expense as a consequent. Freight rises accentuated this antagonism as no matter the nearness of the Island to the mainland it was still charged the standard rate of freightage. Economic dislocation in King Island as a result of quarantine restrictions resembled in miniature the situation in Tasmania. However, to the islanders the situation was much more serious because of their almost total reliance on income derived from consumer goods.³⁷

With the outbreak of influenza in mid August and the strict enforcement of regulations under Section 23 of the 1903 Health Act, a new series of economic problems were posed to the government. These emerged in many facets of the economy but especially in those affected directly by quarantine regulations.

The Tasmanian public reacted calmly, almost with a quiet acquiescence to the announcement that influenza had penetrated the Island's defences. Noticeable was the emergence of the chemist shop

issuing hundreds of different applications each guaranteed in their ability to ward off influenza. One contemporary observed that the regulations had an 'exciting' effect on the people and they actually queued up outside chemist stores to obtain flu antidotes.³⁸

Launceston's motto, 'Business as usual',³⁹ was a poor indicator of the true situation. Numerous reports abounded of employees falling off in their hundreds due to influenza attacks. Perhaps many felt it to be an opportune moment to take a few days off work. One large employer calculated that about thirty per cent of his hands were down with influenza, though others, 'cheerfully reported that they were only two or three hands short and were carrying on and hoping for the best'.⁴⁰ The efficiency of the Post Office, the Police Department and the Fire Brigade was greatly decreased due to absenteeism.⁴¹

Public transport was struck a severe blow. Recent police harassment and booking of those found maskless on tramways led many to find alternative means of transport. Absenteeism also added to this plight. Within two days of the outbreak 60 Hobart tramway employees were struck with the disease and failed to return to work.⁴² Many found it more convenient to walk to their place of employment rather than face the risk of contamination on crowded trams or be muzzled with the uncomfortable mask. Such was passenger fall off that in mid August it was considered whether or not to curtail the service altogether.⁴³ Many tram routes were cancelled. Figures released by Mr. A.C. Parker, General Manager of Tramways, revealed a definite turn away from public transport. The total number of passengers from August 15th to the 29th was 142,700 and the receipts

£1,312 in comparison with 238,000 passengers who paid £2,093 for the corresponding period in the previous year. This meant a passenger drop-off of 93,500 in a single fortnight!⁴⁴ Rail services suffered a similar fate and met heavy losses.⁴⁵

Many institutions and businesses were forced to run on a shorter day basis. Banks closed at noon due to staff shortages.⁴⁶ All shops, with the exception of chemists, druggists and friendly societies' dispensaries were ordered to close at 6 p.m. daily. Theatres, picture halls and billiard rooms were landed the heaviest blow. These were ordered shut immediately with the consequent that many were thrown out of work unexpectedly.⁴⁷

The medical profession was paralyzed by the number of absenteeism. Since August 13th, 24 Tasmanian doctors were reported inactive due to influenza. The majority of these cases occurred in Hobart where twelve were reported, seven in Launceston and two at New Norfolk. Other cases were found in Swansea, the West Coast or the Midlands. That members of this profession were in demand there is no doubt.⁴⁸ However, a major theme of this period involves the consistent lack of professional aid. The ceiling rates offered to voluntary nurses reflects an air of almost desperation in attracting this type of help.

If nurses found the epidemic advantageous for the payrise it brought in its train then those commercially minded did not fail to 'cash in'. One example was profiteering in the sale of masks.⁴⁹ In the country, essential but difficult to get commodities such as sugar, flour and oranges sky rocketed in price.⁵⁰ Booksellers came to the fore with a revolutionary cabinet guaranteed to keep books

free from infective sources.⁵¹ While one contemporary prophesied:

'The sheet vender of masks has not yet arrived, but his presence among us, with his cry of 'masks' is probably only a matter of time'.⁵²

Hotel keepers were also affected. Publicans were warned that henceforth the number of persons legally allowed in bars was three and for five minutes only.⁵³ Seasoned drinkers could avoid this law by travelling from bar to bar but on the whole the industry suffered immensely. The blame lay not so much with quarantine regulations but because the public genuinely did not want to go to the 'pub' where the flu germ was reputedly in abundance. Strict enforcement of regulations which provided £50 for the first offense and £10 for subsequent offenses may have also proved a strong deterrent.⁵⁴

The closing of picture theatres, music halls, billiard rooms and the partial shut down of hotels created a perpetual problem of unemployment for the government during the course of the scourge. Many tended to blame the local authorities for their plight rather than the disease itself. Subsequently, debate, though not of a fiery nature ensued.

Within nine days of Tasmania's infection, deputations of theatrical employees, actors and billiard room proprietors were sent to the mayor of their town with an urgent request for assistance. One member of Parliament suggested that a special bureau be established where men out of work could register and temporarily fill the places of those incapacitated through sickness.⁵⁵ Whether this went into effect is not positive. The government moved to the attack and decided that it would contribute £500 on the pound for pound principle

to the Mayor's fund of Hobart and Launceston.⁵⁶ This fund was set up much earlier to aid the needy and relied totally on voluntary donations. This type of scheme was established so that relief would be of a general nature and different sections of the community could draw on it equally. The government's generosity was by no means confined to Hobart and Launceston for it offered to assist other funds started in the various municipalities.⁵⁷ All the same this did not appear to be enough for picture theatre deputations applying for government compensation can be found as late as September of 1919. The question of unemployment was never really settled until the removal of influenza restrictions in early October when picture theatres were re-opened along with all other institutions whether pleasure or business alike.

In the outlying districts this general pattern was repeated in combination with one other major problem - communications. A major difficulty was that in many country districts telephone operations were shut down at 5 p.m. daily and 1 p.m. on Wednesdays. Thus if one fell sick after these hours then without transport it would have been near impossible to find medical help. A deputation to Mr. D'Emden, Deputy Post Master General, failed to alter the basics of this rule. He felt that such calls for assistance would be answered at the discretion of the local postmistress.⁵⁸

The mining population of Queenstown was laid prostrate by influenza. Perhaps the heavily congested working populace of this district and its corresponding high infection rate is another indicator of the virulence of the disease among tightly knit communities. Within three days of Hobart's infection a high proportion

of Queenstown's stores and businesses were closed down due to absenteeism. This was especially manifest at the mine end of the town where 518 men were missing from one shift alone. That same day only 12 workers ventured to present themselves for the afternoon shift. These were sent home because of their insufficient numbers.⁵⁹ The failure of ore shipments to arrive on time added to the low productivity of the Queenstown mines.⁶⁰ The zinc works at Risdon and the Electra carbide works were at first able to carry on in a comparatively successful manner. However, within a few months it was almost brought to a standstill.⁶¹ Generally, large industry dislocation was minor in comparison to the mainland. *statistics?* After the crisis period of August - September the work force began to return to work and by October - November matters were very much normal again. The shipping problem provided the immediate worry for industrialists for this represented their supply line to and from the mainland.

Industry was not the only sector of the economy upset by influenza. With the closing of schools many teachers became temporarily unemployed. However, state school instructors were given the security of normal pay during the course of the scourge. Those teaching in private institutions were allowed no such compensation and were forced to tutor at private homes, if accepted, or go without.⁶²

The example of council workers and the Public Service also reveals the government's desire to look after 'its own' first and foremost. It was decided that it would be 'fair' to pay half wages to those council employees stricken with the flu.⁶³ In the Public Service, Sir John Gellibrand, the Service Commissioner, announced that

'provisions were being made for permanent employees to receive their (full) salaries while sick'.⁶⁴ Even those who had been working in the Public Service for less than three months 'will have their cases treated on their merits'.⁶⁵ What then of the theatre employees, the billiard room proprietors, and actors - all caught in the web of quarantine regulations spun by the government? All that was acceded to their request was the right to draw an insubstantial amount from the Mayor's fund. Yet if some felt bitter then others were only too glad to accept something, no matter how small, to alleviate their immediate problems. That the government lifted its hand in defiance of the pandemic aided its popularity and allowed subversive labourite propaganda such as advocated in The World to become tarnished in comparison.

Socio-economic dislocation of the period passed quickly through the crisis point of August - September, 1919 when a great percentage of the work force was absent from the job. The remaining months of the year witnessed a decrease in virulence of the disease and return to economic stability. By early October Dr. Clarke was able to remove influenza restrictions that had earlier impeded economic progress. In industry whether wharf labouring or the picture theatre, the Nationalist government extended its points of contact to all parts of the economy. Without its aid many would have been ruined economically or deprived of basic human wants.

FOOTNOTES

1. See McQueen, H., 'The Spanish Influenza Pandemic in Australia, 1918 - 1919', unpublished article, 1973, pp. 11 - 12.
2. Mercury, 16 April, p.6.
3. Ibid., 7 March, p.5.
4. Ibid., 22 March, p.6.
5. Ibid., 17 April, p.4.
6. Ibid., 16 April, p.6, Ibid., 17 April, p.4.
7. Launceston Examiner, 31 January, p.5, Word, 4 February, p.5.
8. See McQueen, H., op. cit., p.12.
9. Mercury, 22 May, p.5.
10. Ibid., 24 May, p.7.
11. Ibid.
12. Daily Telegraph, 7 February, p.3.
13. Ibid., 8 February, p.8; Mercury, 24 May, p.7.
14. Interview, Cicely O'Brien.
15. Ibid.
16. Mercury, 19 June, p.4.
17. Daily Telegraph, 7 February, p.3.
18. Ibid.
19. Ibid., 8 February, p.8.
20. Ibid., 21 February, p.6.
21. World, 20 February, p.6.
22. Daily Telegraph, 12 February, p.6.2
23. Ibid., 21 February, p.6.
24. Premier's Office Records, Vol.337, 1919, 17 February.
25. Launceston Examiner, 4 March, p.5.
26. Ibid.
27. Ibid., 13 February, p.5.

28. Ibid.
29. Ibid.
30. Ibid., 14 February, p.5.
31. Ibid., 13 February, p.5.
32. Premier's Office Records, Vol.337, 1919, 13 June, 1919.
33. Launceston Examiner, 17 February, p.6.
34. Mercury, 21 March, p.5.
35. Ibid.
36. Launceston Examiner, 17 February, p.6.
37. Mercury, 12 April, p.7.
38. Ibid., 16 August, p.7.
39. Launceston Examiner, 19 August, p.5.
40. World, 19 August, p.3.
41. Mercury, 21 August, p.5.
42. Ibid., 18 August, p.5.
43. Ibid.
44. Ibid., 1 September, p.5.
45. World, 19 August, p.3.
46. Ibid., 20 August, p.5.
47. Clarke, A.H., Department Public Health Report, 1918 - 1919; Journals and Papers of Parliament, Vol. LXXXI, p.11.
48. Mercury, 20 August, p.5.
49. World, 4 February, p.5.
50. Interview, Cicely O'Brien.
51. North Eastern Advertiser, 26 August, p.5.
52. Ibid.
53. Clarke, A.H. Department Public Health Report for 1918 - 1919; Journals and Papers of Parliament, Vol. LXXXI, p.11.
54. Mercury, 18 August, p.5.
55. World, 20 August, p.3.

56. Premier's Office Records, Vol.337, 1919, 22 August, 1919.
57. Launceston Examiner, 25 August, p.5.
58. World, 22 August, p.3.
59. Ibid., 19 August, p.3.
60. Ibid., 23 August, p.5.
61. See Mercury, 24 October, p.5.
62. Launceston Examiner, 20 August, p.5.
63. World, 26 August, p.7.
64. Daily Telegraph, 20 August, p.5.
65. Ibid.

CHAPTER THREE

THE SOCIAL AND HUMAN IMPACT

Spanish influenza struck with the ineluctable force of a juggernaut that overwhelmed all attempts at defensive measures. The inhabitants of Tasmania accepted it as part of a new adventure that was beyond their scope of understanding and mortal limitations. Reports of huge morbidity rates in Europe and even the larger, mainland states, forced many to hold the disease in awe and finally bow down before it in a timid submissiveness.

The first reported case of influenza came from Hobart on August the fifteenth.¹ The presence of the virus came as a climax to a series of rumours that had reverberated through the state for months previously. In early February of 1919, reports of spanish influenza stalking throughout the state were widespread.² Many were of the opinion that possible contacts had entered the state via small boats or fishing vessels.³ Contemporaries stressed the inadequacies of policing facilities. In March of the same year rumour turned into fact when it was established that a fireman of the S.S. Oonah had a severe case of pneumonic influenza. The Oonah was subsequently quarantined at Barnes Bay and in the following month developed another seventeen cases of influenza.⁴ Considering the close proximity of Bruny Island to Tasmania it is little wonder that a sense of uneasiness pervaded in the isle. Another suspected case of influenza made sensational headlines in early June, however, it proved without foundation.⁵ The word searched for when reading such headlines was 'simple' in comparison to pneumonic influenza. The former had connotations of a bad cold.

Mere days before the official announcement of influenza many rumours, some wild and some with a grim touch of truth to them, gained circulation. It was alleged that the sick were being taken to the hospital in dozens.⁶ Perhaps this may have been overstated, however, in the country districts, contemporaries assert that influenza had ascendancy days before August the fifteenth.⁷ At New Norfolk the authorities did not attempt to deny that Councillor C.M. McShane's niece died at Sandy Bay with pneumonic influenza one day before the outbreak in Hobart.⁸ Readers were given the calm assurance that, 'it often happens in the case of epidemics that fear kill more certainly than the disease'.⁹ What was the object of Clarke and the Health Advisory Committee in attempting to hide the presence of influenza? Perhaps to avoid panic or allow time for further preparation.

Public disquiet did not end here. Many insisted that influenza was carried through the mail and other similar articles which were shipped from an infected state. Throughout the early months of 1919 there was a public demand for fumigation of the mail and indeed it was staunchly supported by some members of Parliament. J.H.L. Cumpston, the Director of Federal Quarantine, muzzled the issue by stating explicitly that the disease was not transmitted by clothing or mail as the germs die almost immediately upon leaving the body of the infected person.¹⁰ In May of 1919 the landing of five horses in Hobart caused quite a stir. These animals were landed direct from Sydney, an infected state, and taken to the showgrounds at Glenorchy. What put a sharp edge on the matter was that the horses had been transported by the Oonah which held few pleasant memories for most Tasmanians being the cause of a 'flu scare' in

March. The vessel was placed in quarantine but not the horses.

The World, in issuing an attack on the Lee government cited American observers who believed that, 'fleas are responsible to a very great extent for spreading the disease'.¹¹ Such issues were usually taken very seriously by the public and served to heighten prevailing tensions.

The outbreak of the disease received an ambiguous response. To The Mercury it, 'had a sobering effect on many people who were inclined to joke about the situation'.¹² However, instead of a death like foreboding in the city there was a party atmosphere in which people appeared joyous that the waiting was over. Pent-up tensions were released in a spirit of gay abandon. One observer described the scene in Hobart as such:

'All the afternoon people thronged the streets, and the greatest excitement prevailed. Everybody spoke of the epidemic. The hotels were crowded....a great many people seem to have let themselves 'go' for there were more cases of drunkenness in the streets on Saturday night than one would see in a week of normal times'.¹³

Sunday morning in Scottsdale by contrast, 'was unusually quiet and for the first time in the history of the town the church bells did not ring'.¹⁴

With the declaration of Tasmania as an infected state municipal bodies stepped up their defensive operations - but to little avail. Within the space of twelve days the disease had infected Scottsdale and in another nine had reached Zeehan.¹⁵

Enforcement of public health measures were acted upon immediately. Picture theatres, billiard rooms, music halls were closed. The most emphatic advice given to the public was above all

not to panic followed by warnings not to sneeze in the air, to keep away from crowds, to give up hand shaking and kissing.¹⁶ All were possible methods of contact. Yet still people came by the tramloads to patronize their local centres of amusement. When refused entry they wandered aimlessly about the streets eventually returning home. There were few 'flare-ups' due to a consensus of agreement that the restrictions were 'fair'. The postponement of Madame Lucy Atkins' concert at the City Hall disappointed many but was accepted as duly necessary.¹⁷

The one ray of sunshine emerged when Martin Dobrilla who was in the process of breaking his world club swinging record was asked to vacate the National Theatre in Launceston due to the immediate imposition of health regulations. He did so, walked onto the steps of the theatre and swung his clubs among the tumult of the crowd for another 25 minutes. After this time lapse he gave up and retained the title.¹⁸ Women, too, demonstrated their resilience. If the mask was uncomfortable then many were determined it would be fashionable. One observer described the phenomena as such:

'There are pear shaped masks of wire and gauze, pink masks resembling the snouts of pigs....several women wear them like horses with blocks of camphor taking the place of chaff'.¹⁹

The novelty of influenza wore off quickly. Within a month there was hardly any part of the State left untouched by the virus. Eight days after the infection of Hobart The World could report that the city was 'almost deserted' and 'people are not inclined to leave their homes, except some urgent cause compels them to go to the city'.²⁰ The few who patronized the trams braved the cold outside of them rather than venture infection within.

In the country the situation was much worse. Under staffed and ill-equipped hospitals found great difficulty in coping with the influenza toll. Oatlands 'hospital', for example, was reputedly able to maintain a mere four or five patients in comfort. A consistent lack of doctors and nurses didn't help matters. In some areas whole families were found dead. Telephone communication in the country is difficult at any time but especially when the service closes at 5 p.m. Only the more severe cases went into quarantine hospitals - the rest were forced to help themselves. In some areas there was not even a single doctor available. The most helpless victims of influenza were those living alone. If struck they were laid prostrate, unable to lift a finger to help themselves.²¹ The larger cities of Hobart and Launceston appeared to have taken the best of what help and materials were available - the rest went to the country. The experience of 1919 was to demonstrate that this was not nearly enough.

The period provided a wide range of 'pet' antidotes, official and commercial, to combat influenza. Dr. W.L. Crowther advocated inoculating the population with mild doses of the virus in order to immunize against a severe attack.²² The plan was stillborn. Dr. Hislop of Victoria, later stationed in the North of Tasmania, praised the preventitive powers of smoking.²³

Those commercially minded did not fail to capitalise. During and after the outbreak a wide variety of medicines were placed on the consumer market and apparently met a huge success. One advertiser recommended a dose of Conite and Eupatorium or Phoenix inhalant or Dr. Mason's mixture. Failing these Arnold's original

wine tonic was advised.²⁴

The favourite local antidote was alcohol. Huge quantities of beer and spirits were purchased and consumed to the dismay of authorities. One hotel advertised:

'Keep smiling: Be inoculated and drink Archie McCreas Quick Draught Beer: you'll be right'.²⁵

Notable was the increase in drunken disorderly offences. Fortunately for most offenders the court usually took their plea in a good humoured manner. One angry doctor in reply to the McCreas advertisement retorted:

'Alcohol has no place in medicine....instead of being a preventive of any disease it is the best possible persuader of all disease, because it lowers.....the bodily resistance'.²⁶

Another critic claimed that:

'In Danzig, following authorisation of cut price medicinal brandy, the tally of alleged (influenza) sufferers doubled overnight'.²⁷

Fruit also came into vogue as a cure. Oranges especially were brought in such huge quantities that a black market became established in their sale. The platform for one firm's campaign was:

'I fear no more the dreaded flu;
For sun-rayed fruits will pull me through'.²⁸

If all this proved too confusing for the public then the government recommended the standard of Dr. Morse's Indian Root pills followed by a call to the doctor. Such advice was rarely acted upon firstly, because of the unavailability of doctors and secondly because they could do little more than recommend Heenzo and Heans to counter the after effects of an attack.²⁹ The most basic and sound advice that doctors could give was, 'fresh air, sunlight and regular exercise'. One member of the profession noted one benefit of the epidemic when he concluded:

'it is safer to say that the average man is taking considerable more care of his general health than he was a month ago'.³⁰

His final point is the obvious one:

'why should we not always take the same pains to keep fit?'.³¹

If influenza had a dislocating effect on the populace of Tasmania then it also proved decisive in ~~hinging~~ the church to the fore as a critic of the government. Such criticism was not political but merely over the right to conduct church services indoors. The church was seriously alarmed at the fall off of attendance and rallied at the government for transgressing on spiritual authority.

A meeting of ministers in Devonport pointed out that in Victoria similar restrictions proved unsuccessful and therefore were of negative value in Tasmania. Permission for short services to be held was requested but the government stood its ground and refused any such concession. Indoor services were later prohibited altogether through many ministers disregarded the regulation.³² In Scottsdale a visiting Catholic priest conducted mass indoors and was charged with proceedings to take place at a later date.³³ It is hardly likely that he was an example of government repression but merely acted in ignorance of the sincerity of the regulation. In my reading nothing more is heard of the matter.

The church posed as its main theme of argument that the prevailing pandemic would incite the population to attend church:

'....the manifest lesson of history is that in times of trouble and national calamity the people desire to seek God and call upon Him for help....'³⁴

However, the opposite was the case. Many preferred the safety of their own homes than risk contamination in a church.³⁵ The ecclesiastics

were asking the impossible.

A practical member of the clergy wrote to The Advocate and appealed to various congregations to, 'religiously put aside their usual ~~e~~contributions' as 'it maybe very hard for (ministers) in the coming weeks'.³⁶ One observer appealed against the 'impertinent interference' of the government 'with liberty of conscience' and added that 'God', not the government, 'holds us for life and death'.³⁷

Fear of returning troops catching the virus in infected states and delayed family reunions intensi^{ed} public disquiet. Relatives, especially, of soldiers, petitioned the government in protest over detaining the men in Victoria.³⁸

The cancellation of victory parades and the quarantining of troops 'almost within cooee of their own houses' placed a damper on celebrations. It appeared that the Tasmanian public saw smoke where there was no fire. Soldiers quarantined at Bruny were of the opinion that, 'seven days further detention made little difference after four years absence'.³⁹ A.P. Crisp remarks along similar lines:

'....I learned that we were to lie off Portsea in quarantine for seven days. What a blow it was, and how the devil were we to put out time in there? Well, there it was. We had to face it, and we had to go through with it - like it or not'.⁴⁰

Local troops accepted their detention calmly and intelligently without following the precedent set by 'Gunner Yates' who was charged with inciting a mutiny to break out of the Semaphor quarantine station in March of 1919.⁴¹

Quarantine conditions at Bruny were not altogether depressing though they were based along martial lines. Reveille was at 7 a.m., followed by breakfast and roll call. Tobacco, matches and fruit were

given out before the men reported for medical inspection at 9.30.

The rest of the day continued in a similar manner. A multiplicity of recreations were encouraged. Soldiers spent their time fishing, swimming or playing football. The Y.M.C.A. set up three huge tents in the camp where men read, wrote or enjoyed concerts. In addition to these comforts the Red Cross continually supplied the camp with other luxuries as fruit, books and sports equipment which were collected from donors in Hobart. The camp chaplin, Reverend C.H. Sheddin concluded that:

'All the men are contented and happy and fully recognize the necessity of their enforced stay'.⁴²

The mammoth task of organizing defensive measures against influenza and aid for the needy fell on the heads of voluntary organizations and individual arrangements. Charity workers, associations, and long standing bodies such as the Red Cross and the Salvation Army emerged as unselfish and determined social workers. The State government appeared unprepared to cope effectively with the sudden presence of the disease and encouraged philanthropy throughout the social ranks.

Nearly all municipalities opened soup and relief centres. In Hobart, £50 was given by the Liquor Trades Association to the Salvation Army for the establishment of a soup kitchen. The venture proved to be a huge success with 120 gallons of soup being supplied the first day of opening.⁴³ Subsequent kitchens were opened at Sandy Bay, New Town, Launceston, and in all outlying districts. Soup was not the only commodity supplied by these centres. The relief depot at Albert Hall in Launceston distributed milk, fruit, eggs, jam, flour, jelly, salt, matches and so on. All articles were donated freely and in abundance. Boy scouts helped where necessary and motor vans were available for transport.⁴⁴

The Red Cross worked tirelessly to aid the sick and were given encouragement by the State government to act as they saw fit. Its main task was organization. Volunteer staffs were put on duty and the women's wartime military unit was brought together to aid the nursing staff at Launceston.⁴⁵ Soldiers returned to work early to alleviate the unemployment situation.⁴⁶

In Hobart, a meeting of the local clergy and ladies resulted in the establishment of an Emergency Clothing Committee. This group worked in a close co-ordination with the Red Cross and accepted donations of blankets and clothes which were to be passed onto the needy. A plan was drawn up in which the city was divided into thirteen districts. Each section was under the care of a minister, 'who pledged himself to visit every house and report on the need of the sufferers'.⁴⁷

Philanthropy also occurred on an official level. The establishment of a Mayor's fund in Hobart was quickly followed by a similar set up in all parts of the state. The Hobartian population proved extremely charitable and donated over £1000 within a few days.⁴⁸ All such monies were later distributed to the needy, especially those faced with unemployment. The government, as a demonstration of its goodwill, boosted the fund by contributing £500 on the pound for pound principle.⁴⁹ This was later extended to apply to all other similar funds set up in the different municipalities.

Social and sporting pastimes were dislocated by influenza. Race meetings were prohibited, football and all forms of indoor sport such as ice-skating were cancelled. Wide disappointment followed

the postponement of a proposed cricket match between Victoria and Tasmania.⁵⁰ However, such restrictions did not stop the assemblage of 3,000 people at the Launceston Showgrounds for the opening of the Peace Loan Campaign.⁵¹

Public libraries were prohibited from opening at all during the early phase of the outbreak. Restrictions were later modified on the condition that, 'only one person must be present in each room for every 25 square feet of space'.⁵² Meetings, official and recreational were cancelled. In Hobart an important delegation of the Fruit Committee had to disband in the same manner as the Commercial Travellers Association.⁵³ Most lodges and societies deferred meetings until after influenza regulations were removed.⁵⁴

Schools were closed for the latter part of 1919 either because of staff absenteeism or government edict. In the Hobart area schools did not resume until early October. In other districts sporadic outbreaks resulted in the loss of the entire term and classes did not return until the following year. A notable exception was the University of Tasmania which announced its continuation throughout the scourge.⁵⁵ The flu came as a welcomed break to students and teachers alike, the latter more so because they received full pay during the course of the epidemic. Many schools as a consequence were turned into isolation centres and hospitals. The Education Department also placed the Central Cookery School at the disposal of the Red Cross for the purpose of making and distributing soup.⁵⁶

The social effects of the outbreak were ultimately considerable. Due to press reports, letters to the local newspaper, and

so on, Tasmanians became interested and involved in their physical and social environment. Within the space of eight or nine months the image of Hobart as a 'garden city' had been smashed and the burning fester of 'dog kennel' accommodations revealed. In January of 1919 the Huon Times reported:

'We in Tasmania are perhaps more fortunate in that our cities are not so congested and the existence of slums is practically non existent....'⁵⁷

Seven months later The Mercury announced that there were many homes in Hobart 'not fit for any decent pig and that a self respecting dog would turn his nose up at'.⁵⁸

Philanthropy and the quest for social reform coalesced. The establishment of the Vigilance Committee, composed of several members of the clergy, which 'pledged.... to a house to house visitation to ascertain who were in need of Red Cross assistance....'⁵⁹ led to the 'discovery' of whole streets of persons living just above sustenance level. Some such places appeared like the West end of London described in a Dickensian novel:⁶⁰

'In dark back yards a few feet square, sunless, sour smelling and littered with rubbish played the state's embryo citizens. Ragged and underfed, strangers to virtues of self respect....from their baby lips dripped noisomely the jargon of the gutter....'⁶⁰

The Mercury could only conclude that:

'it is the kind of thing that breeds Bolsheviks as well as the pestilence that sweeps off people in epidemics'.⁶¹

In a tour with Reverend E.H. Hobaday of the streets of Argyle to Murray and Warwick to Brisbane Mercury representatives found houses with whole families down with influenza. In most cases the 'rents were high', the 'families large and the rooms small'. In one house a large rug was placed over a hole in front of the fire place 'to

keep you from falling through'. Other dwellings were found in which two families lived in a mere four rooms.⁶²

Rents in such hovels ranged from five to eighteen shillings a week. Many were bound to find their only form of sustenance at the local Salvation Army Soup Centre. At New Norfolk it was discovered that some sick people had only skirts and slacks with which to cover themselves.⁶³

The Mercury saw the issue not only as social but moral:

'Decent houses very often make decent people, just as slums make human rats and city's thieves'.⁶⁴

While Reverend Hobaday declared that the owners of such hovels were 'men without soul or a conscious, men who are as callous as a camel's knee' and deemed that a fitting punishment for them would be, 'to compel them to live in the places they owned and by which they grew fat'.⁶⁵

The slums of Hobart had been an issue for years, however, before the epidemic little was reported to the public and subsequently nothing done. An overwhelmingly bourgeois press, written for the bourgeois, tended to skate over such matters that affected their reader's conscious or purse. Robert Cosgrove, later Premier, felt that this stance was assumed 'to shield the influential owners of slum properties'.⁶⁶ One Labour speaker in the House of Assembly declared that 'the Labour party knew of these things years ago', and that two consecutive housing bills had been introduced but were defeated, 'by the solid opposition of the Liberal party'. He concluded by 'congratulating the clergy on having helped the Labour party convert the government'.⁶⁷ Indications that many Liberal

members owned such tenements were strong.

The Hobart City Council answered its personal critics by stating that many houses planned for condemnation were allowed to stand during the war. It was proposed that a Housing Committee be established which would delve further into the problem. Alderman Soundy felt that 'decent, hygienic houses could be built at £450 a piece'. In a later debate the Premier revealed that £600 - £700 was a more appropriate figure with provisions 'to enable people to buy homes and another to allow them to rent from the government'.⁶⁸

The argument was not altogether one sided. The Vigilance Committee came under strong criticism for blaming the landlord as the whole source of tenants woes. Many answered, mainly landlords, that the opposite was the case. One critic put it as such:

'anyone with an atom of sense (knows that) filth, bugs and rats and untidiness are the result of dirtiness and if people want to get rid of them, soap and water and disinfectants are cheap and easily procurable'.⁶⁹

The Mercury admitted that, 'there are tenants who will make houses filthy 'but' we must trust to better education for children and adults to improve these habits'. It was suggested that prizes be offered for the best homes, failing this, penalties for the ill kept ones.⁷⁰

By the middle of October the Housing Bill was brought before the House for reading. In its final stages it gave the government power to 'acquire land or use crown land' on which to build houses. Such accommodation was to be offered for rental or purchase on easy terms. It also allowed advances to those of 'small means'. The building of soldier's homes was incorporated into this scheme with

total operations expecting to require £70,000. The plan was 'eventually to apply all over Tasmania....but first in Hobart where the need was more urgent'.⁷¹ On the twenty fourth of December, 1919 the Homes Bill entered its final reading and passed into the history of Tasmanian social reform.⁷²

Influenza incited a review of the sewage systems.⁷³ It also implicated the contemporary government and those that followed it in a tacit agreement to take care of the general health and surroundings of the populace. Health was now a political and official issue and the electoral success of a government would depend on its response to the issue.

It was reported that many houses had no sanitary facilities at all and arrangements were made with neighbours for joint use. Three letters were sent to The Mercury on a single day complaining of the bathing accommodations at Cornelian Bay. One critic called them 'glorified pill boxes', and added that, 'one shed has no roof so many bathers disrobe in the open'.⁷⁴ In early March of 1919 one observer complained of gutter conditions in the Moonah area and inferred that, 'two children caught typhoid because of this'. She concluded, 'councillors gutters are clean while residents who pay their taxes (are not)'.⁷⁵

In Tasmania the influenza epidemic created a vigorous and dynamic movement towards social reform. The government came to be viewed as the repository of such measures. Slum clearances began in Hobart and Launceston without 'fees or favour' and has continued until the present day. A general reaction ensued that a part time health officer was not enough. The World called for 'a full time

health officer with a staff freed from the interference of interested and greedy masters'.⁷⁶ The housing problem moved the public mind and shocked people out of the apathy of previous decades. For many, all aspects of their environment from gutters to slovenly kept bathing sheds came under a new and critical eye. No longer could such a problem be swept under the carpet. Father Cullen, active as a social worker during this period called the plight, 'a living mockery of Australia's precious equal opportunity for all'.⁷⁷ The machinations of reform had already begun.

FOOTNOTES

1. Department Public Health Annual Report, 14 August, 1920, (1919 - 1920), Journals and Papers of Parliament, Vol. LXXXIII, p.9
2. World, 1 February, p.5.
3. Interview, J. Reynolds.
4. World, 24 March, p.6, Figures for deaths on S.S. Oonah see World, 25 April, p.6.
5. Ibid, 14 June, p.6
6. Interview, Cicely O'Brien
7. Ibid
8. World, 14 August, p.5.
9. Ibid., 16 August, p.6.
10. Launceston Examiner, 12 February, p.6.
11. World, 12 May, p.6.
12. Mercury, 18 August, p.5.
13. Ibid.
14. North Eastern Advertiser, 19 August, p.2.
15. See notifications table in: Department Public Health Report 1919 - 1920, J. & P.P., No.40, Vol. LXXXIII, p.11.
16. World, 16 August, p.6.
17. Ibid., 18 August, p.6.
18. Daily Telegraph, 18 August, p.4.
19. World, 11 February, p.5.
20. Ibid., 23 August, p.3.
21. Interview, Cicely O'Brien; Interview, J. Reynolds.
22. Interview, William Crowther.
23. World, 26 August, p.6.
24. Launceston Examiner, 27 August, p.1.
25. World, 7 February, p.6.
26. Ibid., 15 February, p.3.

27. Collier, R., The Plague of the Spanish Lady (Atheneum: New York, 1974), p.106.
28. World, 18 February, p.1.
29. Ibid., 8 February, p.8.; see also McQueen, H., 'The Spanish Influenza Pandemic in Australia, unpublished article, p.6.
30. World, 31 January, p.8.
31. Ibid.
32. Advocate, 19 August, p.3., Mercury, 3 September, p.5.
33. North Eastern Advertiser, 19 August, p.2.
34. Advocate, 19 August, p.3.
35. Interview, Cicely O'Brien.
36. Advocate, 19 August, p.3.
37. Ibid.
38. Mercury, 3 February, p.5.
39. Interview, W.L. Crowther.
40. Crisp, A.P., Reminiscences, manuscript, p.131.
41. See McQueen, H., op. cit., p.2.
42. Mercury, 5 March, p.5.
43. World, 26 August, p.7.
44. Launceston Examiner, 28 August, p.6., see also Reynolds, J., Launceston, The History of an Australian City. (MacMillan: Melbourne, 1969) p.155.
45. Reynolds, J. op. cit., p.155.
46. World, 26 August, p.7.
47. Mercury, 5 September, p.5., Ibid., 12 September, p.5.
48. Ibid., 5 September, p.5.
49. Premier's Office Records, Vol.337, 1919, 22 August, 1919.
50. World, 7 February, p.6.
51. Ibid., 6 September, p.6.
52. Ibid., 4 September, p.5.

53. Mercury, 19 August, p.5.
54. One example was 'The Royal Society of Tasmania', see Minutes, p.164.
55. Daily Telegraph, 23 August, p.5.
56. World, 2 September, p.5.
57. Huon Times, 31 January, p.2.
58. Mercury, 27 September, p.6.
59. Ibid., 19 September, p.5.
60. World, 24 September, p.6.
61. Mercury, 27 September, p.6.
62. Ibid., 19 September, p.6.
63. Ibid., World, 10 October, p.3.
64. Mercury, 27 September, p.6.
65. Ibid., 19 September, p.5.
66. Interview, J. Reynolds.
67. Mercury, Debate in House of Assembly, 24 September, pp.5 - 6
68. Ibid., 23 September, p.4.
69. Ibid., 26 September, p.2.
70. Ibid., 27 September, p.6.
71. Ibid., 15 October, p.4.
72. History of the Acts of Parliament Passed, Sessions 10, 11 and 12. George V, 1919 - 1920, p.209
73. Mercury, 23 September, p.4.
74. Ibid., 25 September, p.2.
75. Ibid., 13 March, p.5.
76. World, 24 September, p.6.
77. Ibid.

CONCLUSION

In the introduction to this work several reasons were given to justify an intensive study of the impact and affect of influenza in Tasmania. First and foremost to fill in the gaps of what previously had been virginal ground. Secondly, to test the validity of McQueen's contentions as set out in his paper.¹

What this really amounted to was to discover if Tasmania differed from the example set on the mainland during the epidemic. The author's answer must be a firm no, with one reservation. In comparison to the rest of the world Tasmania felt only the slightest effects of influenza. Even when comparing conditions with the mainland there appeared in Tasmania an enlightened view of the scourge. Energy was not wasted with despair but channeled into social reform. Thirdly, to correct the imbalance created by Marilyn Lake's hasty coverage of 1919.² My fourth point may have become apparent to the reader throughout the pages of the thesis - the topsy-turvy, 'hit and miss' nature of state quarantine regulations and in reference to the April affair the apparent need for a Federalist approach to quarantining.

The work has sought to add to knowledge of the influenza epidemic in a number of ways. The Tasmanian government's quarrel with the Commonwealth over quarantining would appear to confirm McQueen's point that influenza created 'disloyalty' to the Commonwealth.³ The rift was not permanent and was closed by August.

The work has also attempted to fill in gaps left by Lake's research of the period. Though socio-economic dislocation derived

from the epidemic did not come under her topic the author feels that it is interesting as an indication of governmental response. The Lee government had many critics. However, it is felt that given limitation of resources the role of the government during the outbreak was a significant one. Financially it aided hundreds of Tasmanians to sustain themselves; stranded tourists were chartered special boats or loaned the fare to return home; the Red Cross was subsidized in its activities as were the municipal councils. In Launceston, those unemployed as a result of influenza were placed on quasi - R.E.D. schemes for the duration. Matters may have been much worse if the government had not stood its ground and allowed the ascendancy of commercial interests which advocated the pulling down of quarantine barriers. Its stand against Watt was perhaps over reactive and full of well meaning patriotism but did show its tenacity and courage.

Lake's suggestion that society was divided during and after the war neglects the counter impact of influenza. Society may well have been divided by broken ideals, morals and torn by anguish.⁴ However, the epidemic turned attention, if only momentarily from such inner despair. Another war had to be fought though now the enemy was invisible. If the war proved a great 'disrupter' mentally then political response to influenza revealed no such ailment. The Nationalist government's stand against the Federal authorities was backed whole heartedly by the Tasmanian population. Influenza created a solidarity because all were on the same side of the fence, all were being attacked by the same enemy. Perhaps it may not be an exaggeration to state that the Nationalist victory in the May election of 1919 may have been

aided by the public's general consensus that the government's struggle against influenza had been significant.

However, divisions within society still emerged. Critics rallied at the government because of inconsistencies evident in quarantine regulations. In the May election the Labour party lifted influenza to a political issue but failed to make little impact on voters. Yet these rifts were not permanent but merely sporadic, occurring at intervals throughout the period. For example, Labour dropped the issue soon after the Nationalists were returned to power.

The Lake thesis, in failing to elaborate on the effects of influenza in Tasmania, passed ^{over} many important issues of the period. For example, if people were disillusioned idealists they were nevertheless magmatists who did not neglect their fellow man. A consistent theme of the period is philanthropy in all of its manifestations. The Salvation Army, the Red Cross and the Church played a dominating role in social work. The government, too, played a part. This experience was not unique to Tasmania and according to McQueen occurred in all mainland states.⁵

Quarantining was the dominant theme of the period. Cumpston was to report prematurely:

'...Australia was the only country in the world which escaped a devastating infection of most exalted virulence'.⁶

He added proudly:

'...this escape was directly and solely the result of the work of the Commonwealth Quarantine service....'⁷

In contrast, H.O. Lancaster in The Medical Journal of Australia stated:

'Although Cumpston thought that quarantine had kept influenza out of Australia, it is simpler to believe

'that the quarantine measures delayed its entry, and that had a more rigorous quarantine been practicable politically the influenza epidemic might have been averted'.⁸

The author agrees with this assertion. Strict quarantine in Tasmania averted the disease for several months.

However, the imposition of quarantine regulations was too haphazard. Each state went its own way and bent regulation to suit their particular situation. Tasmania imposed the most stringent regulations of all the states and refused to accept Commonwealth interference. Over all this tended to be a 'messy' system with more defects than benefits. For example, if one state left its ports open because it was infected and another refused to open them because it was uninfected, then shipping ties between the two states were impossible. McQueen's analysis fails to provide the answer to this dilemma. Though the epidemic did not have enough impetus to achieve the establishment of a Federal Health Service Roe assesses that the 'chaos' created by State-Commonwealth wrangling over quarantine 'had the potential for a reaction in favor of centralism'.⁹ Potential became reality on the 12 March, 1921 when a Federal Health Department was created with Cumpston as director general.¹⁰

It is hoped that this work has achieved its objectives. First, to break fresh ground and add to our knowledge of the epidemic in Tasmania. Secondly, to test the validity of McQueen's assumptions and enlarge upon his work.¹¹ Thirdly, to fill in the gaps left by Marilyn Lake's study of the period - especially in relation to governmental response to the outbreak. Fourthly, the author considered it crucial that Tasmania should have a place in

the debate that resulted in the establishment of the Federal Health Department. During this clash Tasmanians were charged with 'having lost their heads' and being 'unfair' and 'unfoolish' with regard to quarantine.¹¹ It is obvious that the Federal authorities wished to avoid such a recurrence.

The Tasmanian epidemic is unique in its ability to allow the observation of political, social and economic forces clashing, and at times, merging. Hence politics and social reform become entwined. It is from these clashes that our conclusions are drawn. Fundamental to this is the human aspect, the reactions of our historical counterparts. Tasmanians, being in the transition period after the war were psychologically and physically unprepared to meet the challenge of influenza. Their attempts to do so is an heroic example of man's ability to climb from the depths of despair and ultimately overcome.

FOOTNOTES

1. McQueen, H., 'The Influenza Pandemic in Australia, 1918 - 1919', unpublished article, 1973, pp.1 - 16.
2. Lake, M.L., 'Tasmania and The First World War : A Study of the Effects of the First World War on Tasmanian Society and Politics, 1914 - 1919'. M.A. Dissertation, University of Tasmania, 1972.
3. McQueen, H., op. cit., p.15.
4. Lake, M.L., op. cit., p.339
5. McQueen, H., op. cit., pp.10 - 11.
6. Cumpston, J.H.L., Influenza and Maritime Quarantine in Australia (Melbourne: C of A Quarantine Services. Publication No.18, 1919), p.62.
7. Ibid.
8. Lancaster, H.O., 'Cause of the Decline of Death Rates in Australia, M.J.A. 18 November, 1967, p.938.
9. Roe, M., 'The Establishment of the Commonwealth Department of Health: Its Background and Significance', manuscript, p.4.
10. Ibid.
11. Commonwealth, Parliamentary Debates, Senate and House of Representatives, 1920 - 1921, Vol.XCIII, 6 October, 1920, Quarantine Bill, p.5349.

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